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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	i
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

AND STATED

OCT 2.3 2014
7. LEMIEUX

## **COVER LETTER**

Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: NW 74 ninnearnier Services For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$52.50 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed)

**Mailing Address** 

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address Amendment Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation

Veronar Transport Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
712 000027285
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  West Value Deach
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  West Palm Beach F1, 33411
D. <u>If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:</u>
Name of New Registered Agent
New Registered Office Address: West Puln Beach Florida 3341 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

AFPROVED AND FILED 14 OCT 14 PH 6: 24 SECRETARY OF STATE

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Francisco Carrende	ana san	ny Simin, S) as an Ada.	
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name A	Address Cll - 110
1) Change	1	Omar Honso	7659 Ellen Un West Palm Beach
Add Remove			FI 33411
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(y nor apprecioie, marcaie 1771)	

The date of each amendment(s) adoption:	101	17	2014	, if other than the
date this document was signed.  Effective date if applicable:	10	[,	2014	
in appearant.	(no more than 90 day	s afte	er amendment file date)	<del></del>
Adoption of Amendment(s) (CI	HECK ONE)			
The amendment(s) was/were adopted by the by the sharcholders was/were sufficient for	shareholders. The num approval.	ber o	of votes cast for the amendment(	<u>s</u> )
The amendment(s) was/were approved by the must be separately provided for each voting				ent
"The number of votes east for the ame	endment(s) was/were suff	ficien	nt for approval	
by	oting group)			
The amendment(s) was/were adopted by the action was not required.  The amendment(s) was/were adopted by the action was not required.  Dated  Signature				cr
selected, by an inc		ds of	ectors or officers have not been a receiver, trustee, or other count	
<del></del>	(Typed or printed	l nan	ne of person signing)  dent	<del></del>
	<u> </u>		on signing)	<del> </del>